

**Factors Influencing the Struggle towards Reduction of Gender-Based Violence in Meru District Council, Arusha Region. Tanzania.**

---

**ABSTRACT**

It is important to end Gender-Based Violence because of its consequences in communities but there are factors influencing the efforts toward Reduction of Gender-Based Violence. Tanzania Police Gender and Child Desk fight against gender violence among different communities whereby gender violence survivors report cases with assurance of professional treatment by trained police officers. Main objective was to analyze factors the Performance of Police Gender and Children Desk on Reduction of Gender-Based Violence in Meru District Council, Arusha Region. Tanzania. A cross-sectional research design involving 324 heads of households was adopted for the study. Data were collected using household survey questionnaire and analysed using Multiple linear regression model. Factors; Gender-based Violence cases resolved, number of Gender-based Violence cases reported per annum, increased number of Police officers trained on Gender-based Violence, Level of community awareness and community members trained on Gender-based Violence per annum were statistically significant at 1%. It is concluded that Police Gender and Children Desk had significant contribution in reduction of gender-based violence in Meru District Council of Arusha Region. The study recommends that the gender issues related stakeholders at the country and international levels support the Police Gender and Children Desk to end as Gender-based Violence.

*Keywords: Police, Gender, Children, Desk, Gender-Based Violence*

**1. INTRODUCTION**

**1.1 Background**

Gender based violence (GBV) is a harmful act directed to an individual based on his or her gender attribution. It is rooted in gender inequality, the abuse of power and harmful norms, values, and traditional practices. GBV is one of the worst human rights violations practiced to human kind World Bank [1]. Similarly, it is stipulated that the problem of GBV is a common reality in the lives of women and girls in many parts of the world, developing and industrialized countries alike. It has been recognized as a violation of basic human rights of women and of their exercise of fundamental freedom Michau [2]. According to the United Nations General Assembly (UNGA) UNGA [3], types of gender based violence include; First, physical violence such as beating, punching, pushing, grabbing, maiming and killing with or without weapon and Female Genital Mutilation among others; Second, psychological violence including: verbal abuse, scolding, isolating, verbal humiliation, gesture, annoyance, slandering and disgracing; sexual abuse including rape, dishonesty in relationship, forced unprotected sex, touching of private parts of a person without his/her consent UNGA [3]. Third type is economic violence including, lack of voice in economic rights affecting one's life, working for less pay, failure to own property that one deserves, trafficking of persons, denial of basic necessity for instance food, denial of education as a basic right, and early marriages.

Literature shows that at least one in every five of the world's female population have been physically or sexually abused at some time UNGA [3]. This fundamental violation of women's rights has devastating consequences for women and men, their families and the broader community World Bank [1]. Literature shows that worldwide, an estimated one in three women will experience physical or sexual abuse in her lifetime UN WOMEN [4]. In Tanzania, over 20% of women aged 15-49 years reported having experienced sexual violence in their lifetime and nearly 40% reported having

experienced physical violence LHRC[5]. The same survey showed that 44% of ever-married women had experienced physical and/or sexual violence from an intimate partner in their lifetime. Despite this high prevalence of violence, formal support services for survivors are inadequate McCleary - Sills[6].

Gender-based violence (GBV) undermines the health, dignity, security and autonomy of its victims, yet it remains shrouded in a culture of silence Garcia [7]. It is amicable that lack of political will by governments, weak commitments by communities, low level of community awareness and general public resistance to reduce GBV are some of the obstacles to addressing GBV. These obstacles are more exacerbated in countries subject to chronic conflict and government instability Salami [8]. UNFPA works with government, UN Agencies, and international and local organizations to provide medical care and social support for the survivors of GBV as well as to increase accountability and to prevent GBV more broadly. This includes: *inter alia* the following; advocating for the implementation of policy and legal reforms and supporting the development of guidelines and standard operating procedures, strengthening the capacity of national mechanisms to contribute to the prevention of GBV and facilitate recovery and ensure access to justice for survivors UNGA[3].

GBV remains a major global challenge with its most ugly face in Africa, Tanzania inclusive. Gender-based violence in Africa, as elsewhere in the world, is a complex issue that has its root to the structural inequalities between men and women that result in the persistence of power differentials between the sexes. UNFPA prioritizes advancing gender equality and women's empowerment in globally through the support of the National Plans of Action to End Violence Against Women and Children (NPA-VAWC) is at the core of the current UN based programmer to tackle GBV at the policy and implementation level UN WOMEN [4]. In 2004, women lobbyists identified the need for the establishment of gender desks for reporting domestic violence and rape in police stations as critical to enhancing their wellbeing. The government in its Poverty Reduction Strategy Paper (PRSP) and development plan undertook to set up gender desks in ministries and especially in police stations country wide URT [9].

Tanzania Police Gender and Child Desk was established in 2009 with the purpose among others to fight against gender violence among different communities in Tanzania. During its inception the TPGCD there were a total number of 320 desks countrywide. However, to date (2022) there are a total of over 400 desks in Tanzania including 7 desks from Zanzibar. Likewise, in Arusha Region there is a total number of 20 gender desks. Moreover, in Meru District Council there is a total number of five (5) gender desks namely Usa River, Tengeru, Mbuguni, Ngarenanyuki and, Kikatiti[10]. The government has established gender violence desks in police stations where gender violence survivors are being encouraged to report with assurance of professional treatment by trained police officers World Bank [1]. In addition, the government is committed to fight GBV as evidenced by the signing of international conventions on gender violence and developing various policies and strategies addressing gender violence.

## **1.2 Problem Statement**

Despite the establishment of specialized Police Gender and Children Desk since 2009 in Tanzania Gender Based Violence is still increasing. In Tanzania, women population segment is still highly exposed to gender-based violence risks compared to their men counterpart and they are vulnerable to human right violations to the time being. TDHS[11] observed that in Arusha Region physical violence and female genital cutting had a gender-based violence index of 41% compared to the national index of 24%. These facts indicate that the GBVI Arusha Region is alarmingly higher than the national average index for GBV. Nearly half of Tanzanian women under the age of 50 say they have been physically or sexually assaulted, with one-in-three girls under 18 experiencing sexual violence, according to a 2015-2016 Ministry of Health survey of 13,376 households across the country. Tanzania Women Lawyers Association[12]

## **1.3 Study Objective**

The objective of this study was to analyse the factors influencing Police Gender and children desk on reduction of gender-based violence in Meru District Council at Arusha Region.

## **1.4 Literature Surveyed**

### **1.4.1 Theoretical discourse**

This study was guided by the Socio-economic Theory which states that gender-based division of labor has created differences in gender relationships thus aggravating gender-based violence UN WOMEN [4]. This socially constructed and construed relationship as well between, men and women, girls and boys, children and adults, and the aged, created a loophole in increased the gender gap between men and women. The allocation of activities, in terms of sex such as domestic chores or in door activities as well as child rearing and family feeding by cooking food stuff to women and the outdoor activities be assigned to men has impact on gender disparity in our societies. It is an amicable fact that man became naturally selected for outside home activities rendering himself to feel superior to a woman, this situation creates a gender gap and instigated the condition of gender-based violence which still prevail to date. The theory narrates further that the man's natural features should not be taken for granted as a means to grab for a woman's right of action. The theory further shows that this situation of gender violence can be mitigated by the communities through attitudinal changes that can alter the cultural set-up of out-dated norms and values. It is also assumed that these social and cultural traits and practices create a sense of gender superiority of one gender over the other one. The dominance of male gender over the female gender enables a man to be the main bread winner in the family and hence usurping the auspice of decision-making prerogatives of a woman. Under this situation a man is considered as the first citizen and the woman as the second citizen.

### **1.4.2 Empirical review**

The study by Rugimbana [13] reported that socio-cultural, economic and related factors influence physical violence among married women. Ndyamukama [14] analyzed the effectiveness and efficiency of police workforce: empirical evidence from gender and children's desk section in Katavi region, Tanzania. The study found that, the drivers behind establishing a gender desk in the Police force include; the qualitative size of the Police gender desk and the skills involved, gender desk qualitative awareness and trending issues in gender desk operation. Wanjohi [15] assessed if the police gender desks were effective in addressing GBV in Kenya and found that, budget deficit and fewer number of police officers and lack of training to the gender desk police officers are among the factors for the performance of the police units toward fighting GBV. Likewise, UN WOMEN [4]. Study in Masaka Uganda asserted that Police Gender and Children desks performed well when there is high support by the government apparatuses. However, the study argued that training of police officers on gender based violence in the country helped in reducing gender based violence.

## **1.5 Study Justification**

Gender-based violence perpetrated against women by their husbands or intimate partners is a significant problem in Tanzania. USAID, [16]. The perpetrators of sexual violence on ever-married women were current husbands/partners (48%), former husbands or partners (21%), and current or former boyfriends (7%). In the case of never-married women, 27 percent of perpetrators were by current or former boyfriends Brady, [17]. Many girls and boys are also exposed to violence in their homes as well as being exposed to forms of violence against children in their families, schools, and communities USAID, [16].

The report from the Ministry of Home Affairs in Tanzania revealed that the gender-based violence cases from 2019 to 2021 were as follows; there were rapes 19,278, molesting 3,250, and 3,077 being molesting done to males, and 183 was done to females. Also, violence against children through fire burns cases were 198 whereby 73 were boys and 266 were girls, whilst, battery cases were 4,211 whereas, 16 were males and 4,195 were females, and child dumping cases were 443, in which 177 were male babies and 266 were female babies URT [9].

## 2. RESEARCH METHODOLOGY

### 2.1 Study Area and Design

This study was conducted in the two wards of Mbuguni and Akheri in Meru District Council at Arusha Region in which a cross-sectional research design was employed. The district was chosen because it was observed that in Arusha Region physical violence and female genital cutting had a gender-based violence index of 41% compared to the national index of 24%. These facts indicate that the GBVI Arusha Region is alarmingly higher than the national average index for GBV. Likewise, GBV in Meru District Council was observed to be higher than the regional figure and was estimated to 51%. URT, [18].

### 2.2 Study population and Sample size

The population for this study involved individual households in which there were a total of 1714 households from the study area. A sample of 120 households was estimated using Yamane formula Yamane, [19].

Sample size computation was as follows:

$$n = \frac{N}{1 + N(e)^2}$$

Where;

$n$  = Sample size estimate,

$N$  = Total population [households from the two wards] (=1714),

1 = Constant,

$e$  = Precision level of 95% confidence level (=0.05)

$$n = \frac{1714}{1 + 1714(0.05)^2}$$

Therefore,  $n$  = 324 Households

### 2.3 Sampling Techniques

#### 2.3.1 Simple random sampling

The study employed simple random sampling to obtain 324 heads of the households in two wards of Mbuguni and Akheri of Meru District Council. The district has a total of 17 wards namely; Ngarenanyuki, Leguruki, King'ori, Maji ya Chai, Kikatiti, Maroroni, Makiba, Mbuguni, Kikwe, Usa River, Nkoaranga, Poli, Seela Sing'isi, Akheri, Nkoanrua, Songoro, Nkoarisambu.

Then, two Villages were randomly selected from each ward making a total of four villages. ePatandi and Akheri villages (Akheri Ward) and Mbuguni and Mlingarini Villages (Mbuguni Ward). However, 81 heads of households from each village were randomly selected.

#### 2.4 Household Survey Data Collection Method

A household survey questionnaire with both open-ended and closed-ended questions was formulated for administration to the heads of household or their representatives at the household level. The instrument focused at eliciting information on influencing variables for the performance of Gender and Children Desk toward reduction of Gender-Based Violence.

## 2.5 Data Analysis Method

The factors influencing of PGCD performance on GBV reduction was analysed using Multiple Linear Regression Model. The dependent variable was the number of Gender based violence cases reduced. The model is specified as follows:

$$Y_i = a_0 + B_1X_1 + B_2X_2 + B_3X_3 + B_4X_4 + B_5X_5 + B_6X_6 + e$$

$Y_i$  = Numbers of Gender Based Violence cases resolved (Total number of rapes, forced marriages and FGM cases resolved).

$a_0$  = A constant

$B_1$ – $B_6$  = Coefficients of regression

$X_1$  = Household size (Number of members)

$X_2$  = GBV cases resolved (The number of cases)

$X_3$  = GBV cases reported (total number per annum)

$X_4$  = Police officers trained on GBV in 2020-2021 (total number trained)

$X_5$  = Level of community awareness (community awareness index)

$X_6$  = respondents trained on GBV per annum (total no. trained)

$e$  = Regression error term

### Computation of Community Awareness Index

Four (4) statements were constructed to represent Community Awareness (CA) on GBV and were assigned scores i.e. 1 =yes and 0=otherwise. The following formula was used to compute Community Awareness Index (CAI);

$$CAI = \text{Total Score Obtained} / \text{Maximum expected score}$$

The formula for CAI was adapted from Meena *et al.*[20].

## 3. RESULTS AND DISCUSSION

The results revealed that there total number of GBV cases resolved influenced the performance of Police Gender and Children Desk (PGCD) on reduction of Gender – Based Violence (GBV) positively and significantly ( $\beta = 0.207$ ;  $P = .000$ ) (Table 1). Meaning that the desk had a significant contribution on the reduction of GBV cases in the study area. This implies that if more efforts are put in resolving GBV cases, GBV will be reduced significantly. These findings are concomitantly to the findings done by Lockheed *et al.*, (2017) who found that the Police Gender Desks had significant contributions on abating the problem of GBV in countries where they exist.

It was found that, the reduction of GBV was significantly influenced by the number of GBV cases reported to Police Gender and Children Desk ( $\beta = 806.487$ ;  $P = .000$ ) (Table 1). The sign of the relationship between the two variables is positive meaning that the increase in cases reported trigger the performance of the desk. The study results imply that the more the GBV cases are reported to the PGCD, the more the desk performs to resolve the cases and the more the GBV cases are reduced in communities. These findings are akin to the findings obtained by Yang, (2016) who found that total number of GBV cases reduces where the police desks are operative.

**Table 1: Factors influencing PGCD performance on reduction of GBV(n=324)**

Independent variables	Standardized Coefficients	Std. Error	Beta	t-value	Sig.
(Constant)	3761.904	814.38		4.620	.000
$X_1$ = Household size	3.808	89.798	.002	.042	.966
$X_2$ = No. of GBV cases resolved by PGCD	0.207	.014	.811	14.457	.000*
$X_3$ =No. of GBV cases reported in PGCD	806.487	159.463	.192	5.058	.000*

$X_4$ =No. of Police Officers trained on GBV	6.096	.523	.454	7.119	.000*
$X_5$ =Community awareness level	70.533	6.305	.441	10.250	.000*
$X_6$ =No. respondents trained on GBV	72.879	6.476	.443	11.254	.000*

R = .935,  $R^2 = .874$ , Adjusted  $R^2 = .870$ , Std. Error of the estimate = 432.327.

\* =Sig at 1% level

Training is an important component for any person or officer who is often involved in decision making as it adds on knowledge and skills. For this essence, exposing Police Officers to GBV matters is a pre-disposing factor for their performance in resolving GBV cases. The results discovered that there was a significant and positive influence between the number of Police Officers trained on GBV and reduction of GBV ( $\beta = 6.096$ ;  $P = .000$ ) (Table 1). The positive sign of the influence means that the increased number of trained officers contribute towards their cooperation and diversity on resolving many and different GBV cases. The study results imply that trainings acquired by Police Officers on GBV add more to their knowledge and skills on resolving GBV cases and eventually impact on the reduction of violence. This study argument is similar to that of Mussa and Mohamed. [21]. that rests on the importance of training on the performance of police officers especially towards reduction of violence.

The results revealed that there is a positive influence between the Level of community awareness and reduction of GBV ( $\beta = 70.533$ ;  $P = .000$ ) and the influence between variables was significant (Table 1). This means that community awareness played a remarkable role in reducing GBV. It implies that once community members are well informed on GBV then will assist respective Police Officers to deal with GBV and eventually will lower down the cases of GBV in the communities. In a similar vein a study done by Phillips (2015) who found a significant influence of community awareness on the reduction of GBV.

The study found that number of respondents who are trained on GBV was statistically significant and had a positive influence on reduction of GBV in the study area ( $\beta = 72.879$ ;  $P = .000$ ) (Table 1). This means that the trainings on GBV to respondents help them to create and raise awareness on GBV including understanding and reporting mechanisms of GBV cases. This implies that training community members on GBV will capacitate them with knowledge and skills to deal with GBV matters and ultimately help to reduce GBV incidences in the communities. These findings are in line with many studies which have revealed that community awareness and training community members to use gender-based violence information efficiently, as a well-trained person acquires more information and, to a large extent, is a better advocate in fighting against GBV (Hayami, 2017).

## 4. CONCLUSION AND RECOMMENDATIONS

### 4.1 Conclusion

GBV cases resolved, number of GBV cases reported per annum, increased number of Police officers trained on GBV, Level of community awareness and community members trained on GBV per annum are the important variables for the performance of Police Gender and Children Desk as well as toward reduction of Gender-Based Violence.

Police Gender and Children Desk had both important and effective role and functions in reduction of gender-based violence in Meru District Council of Arusha Region. The contribution of PGCD in reduction of gender-based violence in the study area was substantial and statistically significant. It can be concluded further that the PGCD is conceived by people as both necessary and effective in taking up its role of reducing GBV.

### 4.2 Recommendations

It is recommended that the gender issues related stakeholders include International Agencies, the Central Government, district councils, NGOs, other development partners to contribute their efforts to empower Police Gender and Children Desk as well as community member on how to overcome incidences resulted from GBV. Also, PGCD should strive to empower households with mechanisms

deemed necessary for reducing gender-based violence at household and community levels including digital mechanisms of reporting GBV cases and incidences.

## CONTRIBUTIONS TO KNOWLEDGE

In Tanzania, police Gender and Children Desks play big role towards combating Gender-based Violence in societies. Therefore, it is imperative knowing the factors that influence performance of desks.

## REFERENCES

1. World Bank. General Based Violence Prevention and Response Project, Standalone Published Washington DC; 2019.
2. Michau, L. Preventing Gender-Based Violence in the Horn, East and Southern Africa: A regional Dialogue: Raising Voices and UNHABITAT, Safer Cities Programme; 2015.
3. UNGA. Violence Against Secretary Generals Resources Guide Women and Girls; 2017.
4. UN WOMEN. Forces to Fight Sexual and General Based Violence Prevention and Response Project, Standalone Published Washington Dc; 2017.
5. LHRC. Annual Report-2017 Renewed quest for Human Rights Advocacy Dar Es Salaam Printing Press Form; 2017.
6. McCleary - Sills. Help-Seeking Pathways and Barriers for Survivors of Gender-Based Violence in Tanzania: Results from a Study in Dar es Salaam, Mbeya, and Iringa Regions; 2013.
7. Garcia, C. WHO Mult-Country Study on Women's Health and Domestic Violence against women. Published by World Health Organization; 2019.
8. Salami, I. The Girl-Child: Work and Health Hazards". *Journal of Women in Academics*. 2019;(1).
9. URT. Ministry of Health and Social Welfare: National Management Guidelines for the Health Sector Response to Prevention of Gender-Based Violence (GBV), Government printers, Dar es salaam; 2011.
10. Mwinula, M. Combating Violence Against Women Gender violence and UNESCO role in the establishment of National Gender Research and Documentation Centre in Tanzania; UNESCO National Commission, Dar es Salaam; 2016.
11. TDHS. Tanzania Demographic & Health Survey 2019-2020, A comprehensive Country wide Survey, Dsm, Tanzania; 2020.
12. Tanzania Women Lawyers Association. Review of Gender Discrimination Law in Tanzania. Published by TAWLA Dar Es Salaam; 2021.
13. Rugimbana, A. M. Factors contributing to physical gender violence among married women in arumeru District Arusha Region. A Dissertation Submitted in Partial Fulfilment of the Requirements for the Degree of Master of Arts in Monitoring and Evaluation of the Open University of Tanzania; 2019.
14. Ndyamukama, C. An Analysis of the Effectiveness and Efficiency of Police Workforce: Empirical Evidence from Gender and Children's Desk Section in Katavi Region; 2016.
15. Wanjohi, A. N. The Effectiveness of Police Gender Desks in Addressing Gender Based Violence: A Case of Nyandarua County – Kenya. A Thesis Submitted to the School of Humanities and Social Sciences in Partial Fulfilment of the Requirements for the Award of the Degree of Master of Arts in Gender and Development Studies of Kenyatta University; 2016.
16. USAID. Gender-Based Violence in Tanzania: An Assessment of Policies; 2021.
17. Brady, A. Female Genital Mutilation: Complications and Risk of HIV Transmission, AIDS Patient Care and STDS". In *Abandoning Female Genital Cutting*. Washington; 2020.
18. URT. Tanzania Demographic and Health Survey 2010. Dar Es Salaam; 2017.
19. Yamane. *Research Methodology: Methods & Techniques* (Eds) New Age International (P) Ltd. New Delhi; 1967.
20. Meena, D. K., Ram, H. and Meena, B. S. Adoption of improved animal husbandry practices by the members and non-members of dairy cooperative societies in Bikaner. *Indian Journal of Dairy Science*, 2012; 65(4): 356 – 358.
21. Mussa, M. A., & Mohamed, F. Challenges Facing Police Gender and Children's Desks in Reduction of Gender-Based Violence and Violence against Children: A Case of Kinondoni District, Dar Es Salaam Region, Tanzania. *The International Journal of Humanities & Social Studies*, 2019; 7(8). <https://doi.org/10.24940/theijhss/2019/v7/i8/HS1908-001>